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PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number → Place Customer Number Bar Code Label here
 OR
 Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Grover M. Myers	25,359		
August J. Borschke	30,539		
George C. Myers, Jr.	27,040		

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below

Name	Grover M. Myers, Esq.				
Address	Law Department - Patents				
Address	R.J. Reynolds Tobacco Company, P.O. Box 1487, 950 Reynolds Blvd.				
City	Winston-Salem	State	NC	ZIP	27102-1487
Country	USA	Telephone	(336) 741-2694	Fax	(336) 741-5449

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle if any)	Family Name or Surname						
Barry Smith	Fagg						
Inventor's Signature	<i>Barry Smith Fagg</i>						
Residence: City	Winston-Salem	State	NC	Country	USA	Citizenship	USA
Post Office Address	430 Friar Tuck Road						
Post Office Address	Winston-Salem						
City	Winston-Salem	State	NC	ZIP	27104	Country	USA

Additional inventors are being named on the 1st supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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PTO/SB/02A (3-97)
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DECLARATION ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Mickey Lee			Smith				
Inventor's Signature	<i>Mickey Lee Smith</i>					Date	11/30/99
Residence: City	Winston-Salem	State	NC	Country	USA	Citizenship	USA
Post Office Address	4721 Tolley Creek Drive						
Post Office Address	Winston-Salem						
City	Winston-Salem	State	NC	ZIP	27106	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
John Larkin			Nelson				
Inventor's Signature	<i>John Larkin Nelson</i>					Date	11/30/99
Residence: City	Lewisville	State	NC	Country	USA	Citizenship	USA
Post Office Address	395 Saddlebrook Circle						
Post Office Address	Lewisville						
City	Lewisville	State	NC	ZIP	27106	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Travis Eugene			Howard				
Inventor's Signature	<i>Travis Eugene Howard</i>					Date	11-30-99
Residence: City	Clemmons	State	NC	Country	USA	Citizenship	USA
Post Office Address	4906 Dock Davis Road						
Post Office Address	Clemmons						
City	Clemmons	State	NC	ZIP	27012	Country	USA

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	JJ-122-R&D
First Named Inventor	Barry Smith Fagg
COMPLETE IF KNOWN	
Application Number	/
Filing Date	December 1, 1999
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Asymmetrical Trimmer Disk Apparatus and Cigarette Rod Product

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number **TO BE ASSIGNED** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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